

# Creating Health-oriented Plans



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American Planning Association

# HEALTH



The Planning and Community Health Research Center advances plans and policies for improving the built environment to promote public health.

## Planning and Community Health Research Center

Obesity. Food deserts. Accessibility. Transportation alternatives. The way a community is planned — its land development patterns, transportation options, or community design — bears heavily on the health of those living there. By working closely with policy makers, public health professionals, environmental health scientists, transportation engineers, educators, and other community members and experts, planners work to create healthier communities, eliminating adverse conditions and building better places for everyone to live, work, and play.

APA's Planning and Community Health Research Center is dedicated to integrating community health issues into local and regional planning practices by advancing a program of research, outreach, education, and policy.

[Download the National Centers for Planning brochure \(pdf\)](#)

Our work advances healthier policies and planning practices through:

### News

#### Food Policy Councils Briefing Paper [x](#)


In response to concerns about food deserts, obesity rates, agricultural lands loss, dwindling farmer population, and environmental problems, many places are forming food policy councils (FPCs).

#### Healthy Sustainable Food Systems Principles [x](#)


The American Dietetic Association, American Nurses Association, American Public Health Association, and APA

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Anna Ricklin

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AICP



# Social and physical determinants of health



# Healthy Planning Study

- Phase 1: Survey
- Phase 2: Plan Evaluation
- Phase 3: Case Studies



Photo: Healthy Chino/City of Chino



Photo: City of Grand Rapids/Planning Department

# Healthy Planning Phase 1: Survey

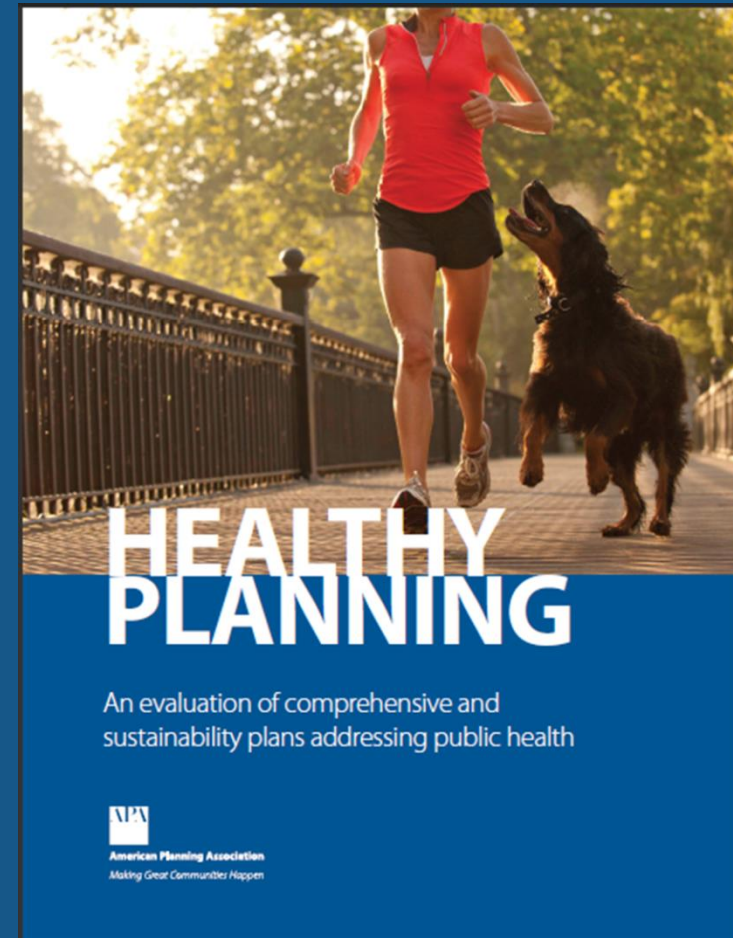
- **Active Living**
- **Active Transportation**
- Chronic Disease Prevention
- **Clean Air**
- **Clean Water**
- Clinical Services
- **Emergency Preparedness**
- Environmental Justice
- **Environmental Health**
- Food Access
- Food Safety
- Food Security
- Health Disparities
- Healthy Eating
- Healthy Homes
- Health and Human Services
- Mental Health
- Nutrition
- Obesity Prevention
- Physical Activity
- **Public Safety**
- **Recreation**
- Social Capital
- Social Equity
- Toxic Exposures
- Other, please specify
- Does the comprehensive plan contain a **stand alone** health element?





# Healthy Planning Phase 2: Plan Evaluation

- Develop a framework for key public health topics
- Identify common goals and policies
- Identify subjects not included
- Assess if health policies are supported by implementation mechanisms, indicators, time lines, funding, responsible parties,



## 1. ACTIVE LIVING

- Active Transport
- Recreation
- Injury

## 2. EMERGENCY PREPAREDNESS

- Climate Change
- Natural and Human-caused Disasters
- Infectious Disease

## 3. ENVIRONMENTAL HEALTH

- Air Quality
- Water Quality
- Brownfields

## 4. FOOD & NUTRITION

- Access to Food and Healthy Food Options
- Water
- Land use

## 5. HEALTH & HUMAN SERVICES

- Accessibility to Health & Human Services
- Aging

## 6. SOCIAL COHESION & MENTAL HEALTH

- Housing Quality
- Green & Open Space
- Noise
- Public Safety / Security

## BROAD ISSUES

- Substantive Issues: Vision Statement, Guiding Principles, and Background data
- Procedural Issues

# Plan Strengths

1. Active Living: most strongly represented across plans; addressed in Parks & Open Space, Urban Design, Transportation/Circulation, and Health/ Healthy Communities plan elements.
2. Environmental Health: second most represented, particularly regarding water and tree planting.
3. Emergency Preparedness policies, when included, tended to be strong and specific with associated implementation mechanisms.



# Plan Strengths

4. When plans addressed food issues, they did so relatively comprehensively and with attention to equity and access for vulnerable populations.
5. The plans that had a standalone Public Health Element emphasized health to a greater extent throughout the plan than those that did not.
6. Most plans were written in accessible, easy-to-follow language and format.



# Areas for Improvement

1. Relatively weak coverage of Food and Nutrition and Emergency Preparedness.
2. Very weak in coverage of Health and Human Services and Social Cohesion and Mental Health.
3. Most plans did not use images, such as maps, to convey information about the distribution of resources, other community assets, SES or health status of populations across the jurisdiction.



# Areas for Improvement

4. Even plans with strong public health-oriented policies did not utilize public health data (e.g., crash or injury rates, chronic disease rates, crime) or include information on the current distribution and accessibility of services (e.g., clinical, grocery, parks or transit).
5. Even plans with strong public health-oriented policies did not identify metrics by which to measure or track success for goals and policies.
6. Most plans lacked implementation strategies, including benchmarks, responsible parties, time lines, etc.



# Example Policy Approaches

Fort Worth, TX:  
separate Public Health  
Chapter included data  
and policies addressing  
nearly all aspects of  
health

## Building Healthy Environments and a Healthy Population



# Raleigh

Raleigh's 2030 Comprehensive Plan wove health throughout each of the the plan elements

## Policy EP 9.6

### Local Produce and Farmers Markets

Encourage the creation and maintenance of produce markets throughout Raleigh to provide outlets for **healthful** and locally-grown produce for residents. Support growing, harvesting, selling and delivery of locally-grown produce. Target areas within limited access to traditional food markets. (5, 6)

## Policy UD 4.10

### Improving Pedestrian Safety

Improve pedestrian safety by providing clear transitions between vehicular and pedestrian areas through landscaping and other streetscape improvements. (4, 5, 6)  
*See also Section B.6: 'Pedestrian and Bicycle Circulation' in Element B: 'Transportation' for additional policies and actions.*

## Policy H 3.4

### Integrated Core Programs

Support Wake County in creating an integrated, comprehensive system of care to provide **health** and behavioral health care, housing, and social services. (1, 2)

# Grand Rapids

*The quality of our green infrastructure will determine the health of our citizens, the economic vitality of our community and the biodiversity of our natural systems.*

- For every element of the plan, identified: **Environmental, Economic, Quality of Life Benefits**
- Used planning process as opportunity to collect baseline data
- Language: “Quality of life”
- Local foundation invested in plan making – now investing in implementation



# Phase 3: Case Studies



Photo: Baltimore County Department of Planning



Photo: City of Grand Rapids/Planning Department



Photo: Healthy Chino/City of Chino

# Seven Jurisdictions

Jurisdiction	Plan Title	Year Adopted	Population	% White	% Individuals Below Poverty Line	% High School Graduate or Higher	% Carpooled to Work	% Public Transit to Work	% Walked to Work	% Receiving SNAP Benefits
Baltimore County	Master Plan 2020	2010	802,487	63.4	8.2	89.2	10.1	4.2	2.3	6.2
Chino	Envision Chino	2010	78,050	27.3	7.4	76.4	11	1.2	1	4.3
Dubuque	Dubuque Comprehensive Plan	2008	57,679	91.1	11.8	90	8	1.4	6.3	10.2
Fort Worth	2012 Comprehensive Plan	2011	724,699	42.3	18.1	79	11.3	1.2	1.1	11.2
Grand Rapids	Green Grand Rapids	2011	189,853	57.8	25.5	82.7	11.1	3.4	2.9	22.7
Philadelphia	Greenworks Philadelphia	2009	1,514,456	37.1	25.6	80	9.2	25.9	8.6	19.7
Raleigh	Planning Raleigh 2030	2009	395,091	53.7	15.1	90.7	10	2.1	2.3	7.3

Source: 2007-2011 ACS 5-year estimates



# Findings: Key Elements

- Champions
  - **Context and Timing**
  - Outreach
  - Health Priorities
  - **Data**
- **Collaboration**
  - **Funding**
  - **Implementation**
  - **Monitoring and Evaluation**



Photo: Healthy Chino/City of Chino



# Context and Timing

- Plan updates
- Integration of multiple efforts, including regional efforts
- Data can spur action
- Funding opportunities



Photo: NeighborSpace of Baltimore County, Inc.

# Data

- Planning process used as way to collect data
  - Community inventory
  - Community Health Needs Assessments
  - Surveys
- Health Department
- Need to address data capture within smaller geographic regions



# Collaboration

- Interdepartmental working groups
- Data collection
- Funding Applications
- Transit-oriented development
- Location, reorganization, and consolidation of departments
- Frequent updates to plan
- High-level mandates
- Non-governmental partners



Photo: Healthy Chino/City of Chino



# Funding

- CTG
- ACHIEVE
- Pioneering Healthier Communities
- CPPW
- CDBG
- HUD Sustainable Communities
- HUD Green and Healthy Homes
- FTA New Starts
- Brownfield tax credits
- FTA/FHWA Congestion Mitigation and Air Quality funding
- Private donations
- Local foundations
- State grants
- Local bonds



Photo left: Baltimore County Planning Department



Photo right: City of Grand Rapids/Planning Department



# Joe Taylor Park, Grand Rapids MI



# Implementation

Active Living	<p><b>Raleigh:</b> Adopted new unified development code – included a 14-foot sidewalk standard in urban areas, a 6-foot width adjacent to private property, and requirement to build sidewalks on both sides of the street</p> <p><b>Grand Rapids:</b> City painting 27 new miles of bike lanes, with goal to reach 100 by the end of 2014.</p>
Emergency Preparedness	<p><b>Philadelphia:</b> Climate Change – New zoning code establishes floor area bonuses for development and redevelopment that achieve LEED Gold or Platinum certification.</p>
Environmental Exposures	<p><b>Dubuque:</b> Installing green roofs on municipal building renovations and adopted hybrid and flex fuel vehicle fleet policies.</p> <p><b>Philadelphia:</b> A notification and opt-out policy adopted to replace a former requirement that the city seek homeowner permission prior to planting new trees along ROW.</p>

# Implementation

Food and Nutrition	<p><b>Baltimore County:</b> Local Health Coalition partnering with schools on childhood obesity prevention through <i>Alliance for a Healthy America</i>.</p> <p><b>Chino:</b> Cottage Food Bill allows people to prepare food items in homes to be sold in local markets.</p> <p><b>Fort Worth:</b> Expanded Farmers Market ordinance to allow frozen meats, cheeses, yard eggs, and baked goods to be sold. New ordinance also reduces vendor permit fees.</p>
Health and Human Services	<p><b>Dubuque:</b> Used radon, air quality, and asthma data from its CHNA/HIP and comp plan updates to secure funding for a Federally Qualified Health Center downtown near transit hubs.</p>
Social Cohesion and Mental Health	<p><b>Baltimore County:</b> Neighborhood Commons zoning overlay adopted in 2012 that can protect certain land parcels from future development</p>

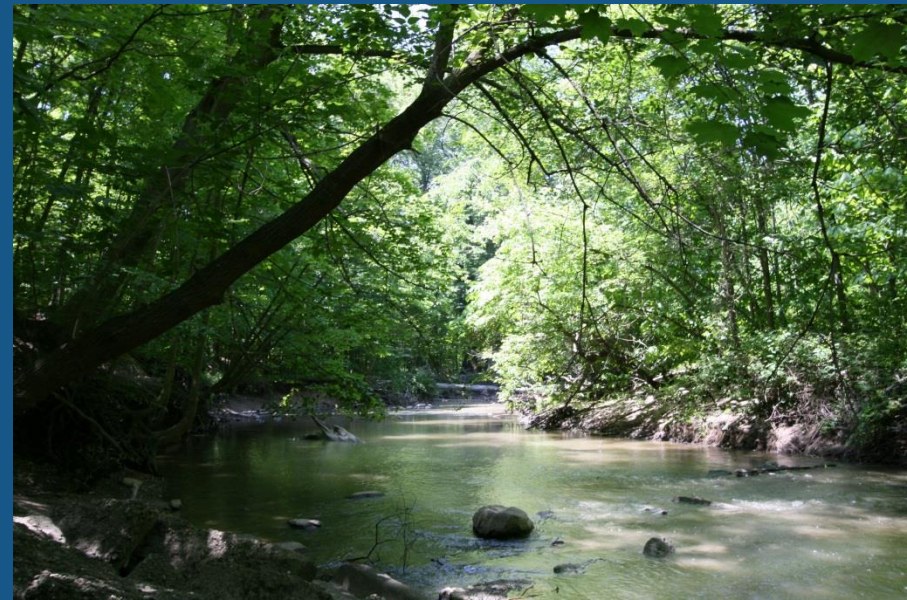
# Recommendations



- Hire Health Department and Planning Department staff who have experience, educational training, or a demonstrated understanding of the connections between the two fields
- Recruit a planning commission member or members with a special interest/expertise in public health
- Institute interdepartmental working groups



- Reach internal consensus across departments on the terms that will be used to discuss different health interventions
- Approach health through language that appeals to residents (e.g., quality of life, community character, providing choices)
- Show the benefits of health interventions that resonate most with residents



- Compile data and input from other departments prior to setting targets



Photo: City of Grand Rapids/Planning Department

- Determine indicators that will be used to track progress on health objectives
- Write specific data tracking responsibilities into plan, include numerical targets, indicators, and reporting

- Use health data and plan goals and policies to strengthen funding applications



- Work across departments on grant applications for health-promoting initiatives
- Find ways to use non health-focused funding streams to promote positive health outcomes



- Align capital improvement plans or programs with comprehensive plan goals



- Ensure that all policies, codes, and subsequent plans reinforce public health objectives in comprehensive plans by tying these processes together





# Potential Partners for Healthy Planning

## Government

- Local, County, and State Health Departments
- Parks and Recreation
- Transportation
- Schools
- Offices of Sustainability
- Mayor's Special Councils (e.g. *Urban Forestry*)

## Non-government

- Local Foundations
- Friends of Parks groups, environmental orgs
- Community Coalitions: Bike/Ped, Trees, Seniors
- Local Food/Community Gardening organizations
- Hospitals

# Other resources to plan for health

- Health Impact Assessment: free online course
- Healthy Community Design Toolkit
- Health Symposium at the National Planning Conference

# Healthy Community Design Toolkit

1. Planning and Community Design Checklist
2. Customizable Powerpoint Presentation
3. Planning and Health Resource Guide
4. Sources of Health Data for Planners

## Healthy Community Design Checklist



Health starts where you live, learn, work, and play



# 2014 National Planning Conference

## Planning Healthy Communities Symposium

- 12 extra sessions addressing health in planning
- *Health Day*
- October 10: Student Proposal deadline



# Thanks!

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[planning.org/nationalcenters/health](http://planning.org/nationalcenters/health)



HIA Training Course:

[www.planning.org/nationalcenters/health/education](http://www.planning.org/nationalcenters/health/education)

Healthy Community Design Checklist Toolkit:

<http://www.cdc.gov/healthyplaces/toolkit>